## **LIMITED LIABILITY COMPANY**

## STATEMENT OF RESIGNATION OF

## **STATUTORY AGENT**

OF

•	(Name of limited liability comp	pany resigning from	(ACC file number)
NO F	FILING FEE REQUIRED		
(LLC)	E: It is critical that the Corporation Commission representations or resigning from. Please check with our Records street information.		nd file number of the limited liability company of or our web site, <a href="www.cc.state.az.us/corp">www.cc.state.az.us/corp</a> to obtain
<u>IMP</u>	ORTANT! You must evaluate both ite	ms. Check only th	nose that apply.
1)	The undersigned statutory agent of		
2)	☐ The known place of business, currently the street address of the undersigned, is also discontinued.		
	The undersigned has given notice of the Liability Company at the following address of the Liability Company at the Liability Company at the following address of the Liability Company at the Liabil	_	ne LLC by mailing one copy to the Limited
		•	y after the date on which this statement is
	DATED this day of		
	Signature:		
	Printed Name:_		
This	form must be delivered to:		
		ORPORATION COI rporations Division	
	1300 West Washington Phoenix, Arizona 85007-2929	or	400 West Congress Tucson, Arizona 85701-1347

LL: 0011 Rev: 08/04